Please print or type in all spaces except signature.

PROPOSER AGENCY REFERENCES

(Not applicable for Right of First Selection agency responses)

Personal information you provide may be used for secondary purposes [(Privacy Law, s. 15.04(1)(m)].

Agency Name			Contract Period			
department can contact for re	son, telephone number, and ap reference in regard to work perfort of Workforce Development e	ormed related to servi				
Agency/Individual						
Contact Person		Title	Title			
City			State	Zip Code		
Telephone Number	Fax Number	E-Mail				
How did this reference gain	knowledge of your agency?					
Agency/Individual						
Contact Person			Title			
City			State	Zip Code		
Telephone Number	Fax Number	E-Mail				
How did this reference gain	knowledge of your agency?					
Agency/Individual						
Contact Person			Title			
City			State	Zip Code		
Telephone Number	Fax Number	E-Mail				
How did this reference gain	knowledge of your agency?					

Agency/Individual							
Contact Person			Title				
City			State	Zip Code			
Telephone Number	Fax Number	E-Mail					
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How did this reference gain know	eage of your agency:						
Agency/Individual							
Contact Person			Title				
City			State	Zip Code			
Telephone Number	Fax Number	E-Mail	•				
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How did this reference gain knowledge of your agency?							
List all of the areas where you have performed work similar to this proposal. Provide the same identifying information, as above, for each area.							
Proposer Agency Director Name or Designee (If designee, attach Designee Authorization)							
Signature				Date of Signature			